SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	 33 (OF	88
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	12		13a		13b	14		15

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or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Barbara Lee for Congress		
Full Name (Last, First, Middle Initial) Bertram Lubin MD Mailing Address 117 Parkside Drive		Date of Receipt
City Berkeley	State Zip Code CA 94705-2411	06 23 2012 Transaction ID : C5290575
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Childrens Hospital Oakland Receipt For: 2012	Occupation Physician & CEO Election Cycle-to-Date	-
Primary X General Other (specify)	2500.00	
Full Name (Last, First, Middle Initial) David R Matteson Mailing Address 11 Village Woods Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Crete	State Zip Code IL 60417	Transaction ID : C5291290
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Retired	Occupation Psychologist	100.00
Receipt For: 2012 Primary X General Other (specify)	Election Cycle-to-Date 210.00	
Full Name (Last, First, Middle Initial) Kenneth Maxey		Date of Receipt
Mailing Address 6229 Provence Rd City	State Zip Code	06 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
San Gabriel	CA 91775-2407	Transaction ID : C5179202
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Comcast	Occupation Government Relations	100.00
Receipt For: 2012 Primary Seneral Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line numb	er only)	